HANDBOOK OF PEDIATRICS—Fifth Edition—Henry K. Silver, M.D., Professor of Pediatrics, University of Colorado School of Medicine, Denver, Colorado; C. Henry Kempe, M.D., Professor of Pediatrics and Head, Department of Pediatrics, University of Colorado School of Medicine, Denver, Colorado; and Henry B. Bruyn, M.D., Associate Professor of Pediatrics and Medicine, University of California School of Medicine, San Francisco, California; Director of Student Health, University of California, Berkeley, California. Lange Medical Publications, Los Altos, Calif., 1963. 602 pages, \$4.00.

This handbook is already too well known to require thorough review of its fifth edition. Suffice it to say it is evident that a successful effort is continually being made by the three authors to keep it up to date. The handbook can conveniently be carried in a medical bag or the pocket of a doctor's gown—albeit a rather large and sturdy pocket. Chiefly for this reason of compactness and convenience it has a place of usefulness for the medical student, general practitioner and pediatrician.

WILLIAM C. DEAMER, M.D.

* *

TETANUS PROPHYLAXIS AND THERAPY—Leo Eckman, D.M., Privatdocent of Surgery, University of Basel. Translated from the German with the Author's Additions to the German Edition. Grune & Stratton, Inc., 381 Park Avenue South, New York 16, N. Y., 1963. 108 pages, \$5.95.

This disease, one of the most excruciating to endure, is still all too common. In spite of effective prophylaxis and advances in the surgical management of wounds, tetanus remains a scourge throughout the world, including our own state and nation. An estimated 50,000 persons die of this malady annually, of whom some 300 are Americans and 20 are Californians.

Nor has the case fatality rate of tetanus improved much in recent times, for it remains lethal in about 40 per cent of all cases, as pointed out by Dr. Eckmann. This author has drawn on his own extensive experience and the vast literature on the subject, reviewing practically all aspects of both the prophylaxis and therapy of the disease.

In his discussion of passive immunization, the author emphasizes the failures of serum prophylaxis as well as its successes. His conclusions are noteworthy: "Considering the experimental, clinical and statistical observations of the past years, it is difficult to understand the confidence with which serum injections are still given to injured persons as prophylaxis. Equally astonishing is that more than three decades after its discovery active immunization is only unwillingly or slowly accepted in some countries, while the serum immunization seems unshakable. Even today, if the physician neglects to give antitoxin following an injury he may be charged with malpractice. On the other hand, because of the serious reactions which can occur following the serum injection, he runs the risk of having to answer insurance claims."

While mention is made of gamma-globulin preparations of human origin containing a high content of tetanus antitoxin, it is somewhat disappointing to a Californian to find so little said of its advantages over animal serum preparations, since most of these researches were made in this state.

The author's consideration of active immunization against tetanus seems to be exhaustive. After a review of the numerous studies made concerning the efficacy and duration of immunity following the initial course of toxoid, it might appear empirical to conclude that, "There can be no question that active immunization can only protect those injured patients who receive a booster or in whom the last toxoid injection took place not more than six months

previously." However, such a dictum may be justified if restated, as by the author himself: "To complete the immunization following an injury, the booster must be promoted as a principle."

Especially recommended for physicians practicing in California is that section of the book dealing with "Tetanus Prophylaxis and 'Malpractice.'"

At the end of his brilliant treatise on the clinical aspects of tetanus, the author summarizes the limitations of therapy and returns to his original thesis—promoting active immunization with toxoid. As Dr. Eckmann points out, "If this sum (the cost of specific medication for one patient with the disease) were used for active immunization, it would be possible to protect about 800 persons from tetanus—safely, surely and enduringly!"

WILLIAM W. STILES, M.D.

* * *

ELECTROCARDIOGRAPHY—Second Edition — Michael Bernreiter, M.D., F.A.C.P., Assistant Clinical Professor of Medicine, University of Kansas Medical School. J. B. Lippincott Company, East Washington Square, Philadelphia 5, Pa., 1963. 202 pages, \$7.50.

This is a second edition of a brief text of electrocardiography aimed at the medical student, general practitioner and internist. There are 198 pages but they contain 162 illustrations and approximately 35 pages of text: this book, therefore, is closer to an atlas than a textbook on electrocardiography. The text consists of a brief discussion of the various aspects of electrocardiography, hardly more than a definition. Some presentations are illustrated by didactic drawings, others by reproduction of tracings. This method appears to be more suitable in presenting arrhythmias than abnormalities of the ventricular complexes, where brevity can be more confusing than valuable. The section most out of place seems to be the one on electrocardiograms in congenital heart disease. One wonders of what possible interest to the student may be the fact that the author observed two instances of Wolff-Parkinson-White syndrome occurring in infants with ventricular septal defects (both tracings are reproduced). Several serious inaccuracies are noted: the caption for Figure 116 states "Pulmonary stenosis (cor pulmonale). Surely the inclusion of right ventricular hypertrophy pattern in the concept of "cor pulmonale" will only compound the already existing confusion in terminology in this area. The statements that atrial septal defect and pulmonary stenosis both show either right ventricular hypertrophy or right bundle branch block will be objected to by those who use the electrocardiogram successfully in differentiating between these two conditions. The statement that tall and peaked P waves are characteristic of Fallot's tetralogy is also incorrect.

Electrocardiography today is in an era of transition with more centers using direct vectorcardiography to supplement diagnostic information. Unipolar lead electrocardiography is being replaced by the vectorial concept. Consequently, today's beginner should at least be exposed to this concept and learn electrocardiography so that he can understand both areas. This has been done admirably by Grant and several of his followers. One can therefore question the emphasis on the various electrical positions of the heart, including clockwise and counterclockwise rotation, and right and left ventricular cavity pattern, as concepts popularized by the unipolar theory, now in part considered incorrect. In the reviewer's opinion this book cannot be considered worthy of recommendation as both the conceptual approach and presentation of the material are dealt with better in several other texts on the subject.

A. SELZER, M.D.